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Acute Coronary Syndromes

EMERGENCY MEDICAL SERVICE CALL WITH ACUTE MYOCARDIAL INFARCTION IN TOKYO METROPOLITAN AREA

Poster Contributions

Hall C

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Session Title: Acute Coronary Syndromes: NSTEMI

Abstract Category: 1. Acute Coronary Syndromes: Clinical

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Authors: *Masao Yamasaki, Atsushi Takagi, Katsumi Miyauchi, Hiroyuki Tanaka, Masatomo Yoshikawa, Hideki Miyachi, Jun Yamashita, Takeshi Yamamoto, Ken Nagao, Morimasa Takayama, NTT Medical Center Tokyo, Tokyo, Japan, Tokyo CCU Network Scientific Committee, Tokyo, Japan*

Background: Acute myocardial infarction (AMI) is required to be treated as soon as possible for minimizing myocardial damage. Guidelines have recommended the patients who suffer from acute chest pain to call emergency medical service (EMS) within 5 minutes.

Methods: In order to elucidate current status of EMS call, we selected patients with AMI in Tokyo CCU network database in 2010-2011. In order to investigate factors influencing elapsed time from onset to EMS call, we analyzed clinical factors including shock, cardiopulmonary resuscitation (CPR), Killip classification, maximum creatine kinase (max CK), and 30 days mortality, in addition to some social factors.

Results: The eligible data were derived from 2255 registered patients with AMI (Age 67.9 ± 12.8 , male 76%). Median time from onset to EMS call was 61 minutes (mean time; 176 ± 268 minutes), and EMS call within 5 minutes was achieved only 9.8% in this patient population. Early EMS call was associated with more severe disease status including shock, CPR, Killip classification 3-4, and higher max CK. On the other hand, late EMS call was associated with female, elderly patients, onset from late at night until early morning, and onset at home.

Conclusions: Not only further educational campaigns and activities for people with coronary risk factors and their families are needed, but also some effective EMS call system should be warranted to help earlier EMS call.